

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		08-05-01
O.I.P.E. CLASSIFIER	MTW	50	08-15-01
FORMALITY REVIEW	AP	508	09/01/01
RESPONSE FORMALITY REVIEW	LS	JC906	12/19/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	0
5	✓
6	✓
7	0
8	N
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15	N
16	✓
17	N
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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1/2/01/06

565  
12/19/01  
JC906  
09/21/01